

RIGHTS AND RESPONSIBILITIES

Purpose: The department and clients have a shared responsibility to determine and maintain eligibility for cash, medical or food assistance programs.

This category provides information about:

- Client rights and the responsibilities of DSHS related to public assistance
- Client responsibilities related to receiving public assistance.

Effective June 1, 2001

WAC 388-472-0005 What are my rights and responsibilities?

For the purposes of this chapter, “we” and “us” refer to the administrations within the Department of Social and Health Services that provide cash and medical assistance benefits. “You” refers to the head of household applicant or recipient.

The following rules apply to cash, food and medical assistance programs unless stated otherwise.

- (1) If you apply for or receive benefits you have the right to:
 - (a) Be fully informed, in writing, of all legal rights and responsibilities in connection with benefits;
 - (b) Be treated politely and fairly without regard to race, color, political beliefs, national origin, religion, age, sex, disability or birthplace;
 - (c) Give us a written request for benefits using a form or alternative method designated by us. You have the right to get a receipt when leaving an application or other materials with us;
 - (d) Ask that the application be processed without delay if you are pregnant, in need of immediate medical care, experiencing an emergency such as having no money for food, or facing an eviction. If you are pregnant and request an interview, you have the right to have one within five working days;

- (e) Get a written decision in most cases within thirty days.
 - (i) Medical and some disability decisions may take forty-five to sixty days. Pregnancy medical will be authorized within fifteen working days.
 - (ii) Food assistance will be authorized within thirty days if you are eligible. If you are eligible and have little or no money, food assistance will be authorized within five days;
- (f) Have information you give us kept private. We share some facts with other agencies for efficient management of federal and state programs;
- (g) For cash and medical assistance programs, ask us not to collect child support if the absent parent may harm you or your child;
- (h) For some cash assistance programs, ask for extra money to help in an emergency, such as an eviction or a utility shutoff;
- (i) Get a written notice, in most cases, at least ten days before we make changes to reduce or end your benefits;
- (j) Ask for a fair hearing if you do not agree with us about a decision. You can also ask a supervisor or administrator to review our decision or action without affecting your right to a fair hearing;
- (k) Have interpreter or translator services provided at no cost to you and without delay;
- (l) Refuse to speak to a fraud investigator. You do not have to let an investigator into your home. You may ask the investigator to come back at another time. Such a request will not affect your eligibility for benefits;
- (m) If you are applying for or receiving medical assistance, limited casualty programs, medical care services, or children's health services you have the same rights as cash assistance clients; and
- (n) Receive help from us to register to vote.

- (2) You are responsible to:
 - (a) Report any changes to us within:
 - (i) Ten days for all cash and food assistance programs; and
 - (ii) Twenty days for all medical assistance programs;
 - (b) Give all the facts needed to determine eligibility;
 - (c) Give us proof of any facts for which proof is needed;
 - (d) For most cash or medical assistance programs related to children, cooperate with us to get child support or medical care support unless you show that cooperation may harm you or your child;
 - (e) Apply for and get any benefits from other agencies or programs prior to getting cash or medical assistance from us;
 - (f) Complete reports and reviews when asked to do so;
 - (g) Get a job or training if required;
 - (h) Show your medical identification card or other notification of eligibility from us to your medical care provider; and
 - (i) Cooperate with the Quality Assurance review process.
- (3) You will be screened for and provided necessary supplemental accommodation services as described in this chapter.

CLARIFYING INFORMATION

See **NECESSARY SUPPLEMENTAL ACCOMMODATION** for rules and procedures related to assisting persons with special needs.

See **NOTICES and LETTERS** for LEP rules and procedures for translated written material.

See **INTERVIEW REQUIREMENTS** for LEP rules and procedures to obtain translators.

WORKER RESPONSIBILITIES

1. A worker must discuss the client's rights and responsibilities with the client at application, eligibility review or recertification and when a client's circumstances change.
2. The DSHS 14-113(X) "YOUR RIGHTS AND RESPONSIBILITIES", provides information about a client's rights and responsibilities for receiving public assistance. Once the worker and the client have discussed this information, both must sign the form. The original is given to the client and a copy is kept in the case record. This form is not available in ACES.
3. For medical cases: when the client mails in the Application for Benefits, Eligibility Review, or Change of Circumstance form, mail a copy of the Rights and Responsibilities and document the action in the record. The client's signature on this form is not a condition of eligibility and the case cannot be pended, denied, or terminated because it is missing.